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CONFIRMATION NO. 6196

<b>SERIAL NUMBER</b> 10/674,857	<b>FILING OR 371(c) DATE</b> 09/30/2003 <b>RULE</b>	<b>CLASS</b> 004	<b>GROUP ART UNIT</b> 3751	<b>ATTORNEY DOCKET NO.</b> EMOON.001RADV1	
<b>APPLICANTS</b> In E. Moon, Irvine, CA;					
<b>** CONTINUING DATA *****</b> This application is a DIV of 09/949,058 09/07/2001 which is a REI of 08/975,803 11/21/1997 PAT 5,946,741 which claims benefit of 60/031,689 11/22/1996					
<b>** FOREIGN APPLICATIONS *****</b> <div style="text-align: center;"><b>** SMALL ENTITY **</b></div>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 7	<b>INDEPENDENT CLAIMS</b> 1
Verified and Acknowledged _____ Examiner's Signature _____ Initials _____					
<b>ADDRESS</b> 20995					
<b>TITLE</b> Hygienic, removable toilet attachment for enema, douche or colonic irrigation					
<b>FILING FEE RECEIVED</b> 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		